

MAR. 28. 2007 3:59PM

INVISTA

NO. 414 P. 1

Kathy L. Crew  
Invista IP Department  
Phone: 302-683-3298  
Fax: 302-683-3473  
Kathy.L.Crew@invista.com



INVISTA™

RECEIVED  
CENTRAL FAX CENTER

Kathy L. Crew  
Invista North America S.à r.l.  
Three Little Falls Centre  
2801 Centerville Road  
Wilmington, Delaware 19808 USA

MAR 28 2007

# Fax

<b>To:</b> Art Unit 1772	<b>From:</b> Kathy Crew (Invista Patents & Trademarks)
<b>Fax:</b> 1-571-273-8300	<b>Pages:</b> 6
<b>Phone:</b>	<b>Date:</b> March 28, 2007
<b>Re:</b> Application No. 10/583,806 Our Ref.: 2003/099ART US	<b>CC:</b>

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

After receipt of the filing receipt, it has come to our attention that the Revocation of Power of Attorney and Change of Correspondence Address which was transmitted to the USPTO on January 9, 2007 (copy attached) has not been entered. The revocation was directed from Customer Number 22474 and the Change of Correspondence Address was to Customer Number 43693 (Invista North America S.A.R.L. - Three Little Falls Centre/1052, 2801 Centerville Road, Wilmington, Delaware 19808). Please enter the attached into the record for 10/583,806 and direct all future correspondence to Customer Number 43693 at the above address. Thank you for your cooperation in this matter.

*The documents accompanying this fax transmission contain information from INVISTA that is confidential and/or legally privileged. The information is intended only for use of the individual or entity named on this transmission cover sheet. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this information is strictly prohibited, and the documents should be returned to INVISTA immediately. In this regard, if you have received this fax in error, please notify us by phone immediately so that we can arrange for the return of the original documents.*

Fa:NO. 414/er P. 2

RECEIVED  
CENTRAL FAX CENTER  
MAR 28 2007

1/9/2007 9:52:16 AM [Eastern Standard Time]  
2 (including cover page)

Received  
Cover  
Page

PAGE 2/6 \* RCVD AT 3/28/2007 3:58:56 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/3 \* DNIS:2738300 \* CSID:3026833474 \* DURATION (mm:ss):02:24

MAR. 28. 2007 4:00PM

INVISTA

NO. 414 P. 3

\*\*\*\*\* COMM. \*\*\*\*\* DATE JAN-09-2007 \*\*\*\*\* TIME 10:05 \*\*\*\*\*

MODE = MEMORY TRANSMISSION

START=JAN-09 10:04

END=JAN-09 10:05

FILE NO.=904

STN NO.	COMM.	ONE-TOUCH/ RBR NO.	STATION NAME/TEL NO.	PAGES	DURATION
001	OK	2	15712738300	002/002	00:00:54

RECEIVED  
CENTRAL FAX CENTER

MAR 28 2007

\*\*\*\*\* CLEMENTS WALKER \*\*\*\*\* 7243659744 \*\*\*\*\*

TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

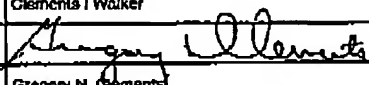
Total Number of Pages in This Submission 2

Application Number	10593,806
Filing Date	22 June 2006
First Named Inventor	Uwe Beyer et al
Art Unit	1773
Examiner Name	not known
Attorney Docket Number	4502

## ENCLOSURES (Check all that apply)

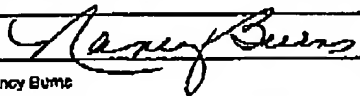
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavit/Declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks _____	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	revocation Power of Attorney return receipt postcard	

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Clements Walker		
Signature			
Printed name	Gregory N. Clements		
Date	January 9, 2007	Reg. No.	30,713

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Nancy Burns	Date	January 9, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is so filed (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including preparing, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

2

Application Number

10/583,808

Filing Date

22 June 2006

First Named Inventor

Uwe Bayer et al

Art Unit

1772

Examiner Name

not known

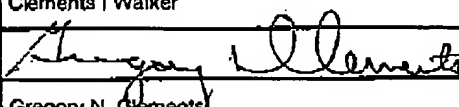
Attorney Docket Number

4602

**RECEIVED  
CENTRAL FAX CENTER****MAR 28 2007****ENCLOSURES (Check all that apply)**

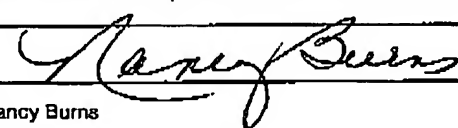
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	revocation Power of Attorney return receipt postcard	

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Clements   Walker		
Signature			
Printed name	Gregory N. Clements		
Date	January 9, 2007	Reg. No.	30,713

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Nancy Burns	Date	January 9, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**FAXED**  
1/9/07